

LISTING OF THE CLAIMS

1. (Previously presented) A pharmaceutical combination comprising an effective amount for a day of l- and d- amphetamines, each in base and/or salt form, and each adapted for release such that the molar ratio of l-amphetamine to d-amphetamine released therefrom in a time period later in the day is higher than said ratio released therefrom in a time period earlier in the day.
2. (Original) A pharmaceutical combination of claim 1, wherein said earlier period is the time before about 1:00 pm of a given day and said later period is the time thereafter.
3. (Original) A pharmaceutical combination of claim 1, wherein said amphetamine released in said earlier period comprises substantially only d-amphetamine, racemic amphetamine, or a mixture of d- and l-amphetamine having more d- than l-amphetamine.
4. (Original) A pharmaceutical combination of claim 1, wherein the molar ratio released of d- to l- amphetamine in said earlier period is about 4/1 to about 2/1.
5. (Original) A pharmaceutical combination of claim 1, wherein the molar ratio released of d- to l- amphetamine in said earlier period is less than 1/1.
6. (Original) A pharmaceutical combination of claim 1, wherein substantially only d-amphetamine is released in said early period.
7. (Original) A pharmaceutical combination of claim 1, wherein said amphetamine released in said earlier period comprises a mixture of d- and l-amphetamine having more l- than d-amphetamine.
8. (Original) A pharmaceutical combination of claim 1, wherein said amphetamine released in said later period comprises substantially only l-amphetamine, racemic amphetamine, or a mixture of

d- and l-amphetamine having more l- than d-amphetamine.

9. (Original) A pharmaceutical combination of claim 1, wherein said amphetamine released in said later period comprises a mixture of d- and l-amphetamine having more l- than d-amphetamine.

10. (Original) A pharmaceutical combination of claim 1, wherein the molar ratio released of l- to d-amphetamine in said later period is about 2/1 to about 6/1.

11. (Original) A pharmaceutical combination of claim 1, wherein substantially only l-amphetamine is released in said later period.

12. (Original) A pharmaceutical combination of claim 1, wherein the total amphetamine dose per day is about 1 to about 200 mg.

13. (Original) A pharmaceutical combination of claim 1, which comprises two separate oral dosage forms, one identified to be administered at a time to provide amphetamine release in said earlier period and the other identified to be administered at a time to provide amphetamine release in said later period.

14. (Original) A pharmaceutical combination of claim 1, which comprises a single oral dosage form which provides amphetamine release in both said earlier and later periods.

15. (Original) A pharmaceutical combination of claim 1, which comprises a dosage form providing immediate release of d-amphetamine in said earlier period.

16. (Previously presented) A method for treating ADHD comprising administering to a human effective amounts of the l- and d-isomers of amphetamine, each independently in free base and/or salt form, and each adapted for release such that the molar ratio of the total amount of l-isomer to the total amount of d-isomer administered per day is greater than 1:3.

25. (Currently amended) A pharmaceutical combination according to claim 1, wherein two doses of amphetamine are administered to the patient in a day, the first dose having an l to d isomer ratio of about 1:3 or contains only d isomer, and the later dose having an l to d isomer ratio of greater than ~~about~~ 1:1 or contains l isomer only.

26. (Original) A pharmaceutical combination according to claim 25, wherein the second dose contains l isomer only.

27. (Original) A method of treating ADHD in a human comprising administering a pharmaceutical combination of claim 1.

28. (Currently amended) A method of treating inattentiveness in an ADHD human patient comprising administering a pharmaceutical combination of claim 1 to said human, wherein the effectiveness of treatment of said inattentiveness in an ADHD human patient later in the day by said l-isomer is as good as treatment with a corresponding molar amount of d-amphetamine and is accompanied by a lesser side effect of sleep deterioration and/or decrease in food intake.